



Inn at Laurel Point

Reservation Form

Group Name: International Virtual Observatory Alliance

Reservation #: 502700

Date: May 16 - 22

Guest Name: _____ Phone: _____

Fax or Email (to send a confirmation letter) : _____

Address: _____

City/Province/State: _____ Postal Code/Zip: _____

Please mark the room type that is requested during your stay:

Guest Room: _____ @ \$ 150 (CDN)

Single occupancy: _____ Double occupancy: _____ One Bed: _____ Two Beds: _____

- Children stay for free in the same room as their parents
- Dogs are welcome for a fee of \$50 for stays of 6 nights or less (\$100 for stays 7 nights or longer)
- Applicable taxes are 10% hotel sales tax and the 5% GST
- Overnight parking available at the rate of \$15.00 plus GST per night per vehicle
- **Room type subject to availability**

I will arrive on _____ (date) Check-in 3:00pm.

I will depart on _____ (date) Check-out 11:30am

Telephone reservations must be made between 7am – 8 pm (PST) Daily.

Please fill out the credit card information below, your reservation will not be confirmed without a credit card. 24- hour cancellation notice is required; otherwise, the first night's room charge plus taxes will be applied to your credit card.

Credit Card Type _____ Bank _____

Number _____ Expiry _____

Name as printed on card _____

Please note at this time reservations are subject to availability.

Please complete this form and send by fax or email (reservations@laurelpoint.com)